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| <b>B22C</b> (Official Form 22C) (Chapter 13) (04/13) | According to the calculations required by this statement:           |
|--|---|
|  | ☐ The applicable commitment period is 3 years.                      |
| In re: Anderson, Dale Wesley Jr.                     | <b>▼</b> The applicable commitment period is 5 years.               |
| Debtor(s)  | <b>☑</b> Disposable income is determined under § 1325(b)(3).        |
| Case Number: <u>13-61952</u> (If known)              | ☐ Disposable income is not determined under § 1325(b)(3).           |
|  | (Check the boxes as directed in Lines 17 and 23 of this statement.) |

# AMENDED CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual Chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

|   |                         | Part I. REP  | ORT OF INCOME  |                          |                                |  |  |  |  |
|---|-------------------------|--|--|--------------------------|--------------------------------|--|--|--|--|
|   | a. [                    | r and a real property of the second s |  |                          |                                |  |  |  |  |
| 1 | All f<br>the s          | igures must reflect average monthly income receivix calendar months prior to filing the bankruptcy of the before the filing. If the amount of monthly incordivide the six-month total by six, and enter the results.   | red from all sources, derived during ase, ending on the last day of the ne varied during the six months, you | Column A Debtor's Income | Column B<br>Spouse's<br>Income |  |  |  |  |
| 2 | Gros                    | ss wages, salary, tips, bonuses, overtime, commi   | ssions.  | \$ 6,787.86              | \$ 2,853.13                    |  |  |  |  |
| 3 | a and<br>one l<br>attac | me from the operation of a business, profession<br>d enter the difference in the appropriate column(s)<br>business, profession or farm, enter aggregate numb<br>hment. Do not enter a number less than zero. Do no<br>nses entered on Line b as a deduction in Part I  | of Line 3. If you operate more than pers and provide details on an not include any part of the business      |                          |                                |  |  |  |  |
|   | a.                      | Gross receipts   | \$   |                          |                                |  |  |  |  |
|   | b.                      | Ordinary and necessary operating expenses  | \$   |                          |                                |  |  |  |  |
|   | c.                      | Business income  | Subtract Line b from Line a  | \$                       | \$                             |  |  |  |  |
| 4 | diffe<br>not i<br>Part  | Gross receipts   | not enter a number less than zero. Do red on Line b as a deduction in  |                          |                                |  |  |  |  |
|   | b.                      | Ordinary and necessary operating expenses  | \$   |                          |                                |  |  |  |  |
|   | c.                      | Rent and other real property income  | Subtract Line b from Line a  | \$                       | \$                             |  |  |  |  |
| 5 | Inte                    | rest, dividends, and royalties.  |  | \$                       | \$                             |  |  |  |  |
| 6 | Pens                    | ion and retirement income.   |  | \$                       | \$                             |  |  |  |  |
| 7 | expe<br>that<br>by th   | amounts paid by another person or entity, on a nses of the debtor or the debtor's dependents, i purpose. Do not include alimony or separate main the debtor's spouse. Each regular payment should be nent is listed in Column A, do not report that payment should be not payment sh | \$   | \$                       |                                |  |  |  |  |

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| 8   | Unemployment compensation. Enter the a However, if you contend that unemployment was a benefit under the Social Security Act, Column A or B, but instead state the amount  | nt compensation received, do not list the amount   | ed by you  | or your sp   | ouse   |   |                             |        |            |
|-----|--|--|--|--|--|---|-----------------------------|--------|------------|
|     | Unemployment compensation claimed to be a benefit under the Social Security Act  De  | ebtor \$   | Spouse \$  |  |  | \$  |                             | \$     |            |
| 9   | Income from all other sources. Specify so sources on a separate page. Total and enter maintenance payments paid by your spot or separate maintenance. Do not include a Act or payments received as a victim of a w of international or domestic terrorism.  a. Disability Income b.  | on Line 9. <b>Do not incluse, but include all otl</b> any benefits received u  | ude alimoner paymenter the Second                                    | ony or sepents of ali<br>ocial Secu  | arate<br>mony<br>rity                              | \$  | 855.00                      | \$     |            |
| 10  | <b>Subtotal.</b> Add Lines 2 thru 9 in Column A, through 9 in Column B. Enter the total(s).  | , and, if Column B is co   | mpleted, a   | add Lines  | 2  | \$  | 7,642.86                    | \$     | 2,853.13   |
| 11  | <b>Total.</b> If Column B has been completed, ad and enter the total. If Column B has not bee Column A.  |  |  |  |  | \$  |                             |        | 10,495.99  |
|     | Part II. CALCULATI   | ION OF § 1325(b)(4   | COMM   | IITMEN   | Т РЕБ  | RIOD  | 1                           |        |            |
| 12  | Enter the amount from Line 11.   |  |  |  |  |   |                             | \$     | 10,495.99  |
| 13  | Marital Adjustment. If you are married, b that calculation of the commitment period u your spouse, enter on Line 13 the amount of a regular basis for the household expenses of basis for excluding this income (such as pay persons other than the debtor or the debtor' purpose. If necessary, list additional adjustry adjustment do not apply, enter zero.  a.  b. | under § 1325(b)(4) does<br>of the income listed in L<br>of you or your depende<br>yment of the spouse's to<br>'s dependents) and the a | s not requi<br>ine 10, Co<br>nts and spo<br>ax liability<br>mount of | tre inclusion in the cify, in the core of the specify in the specific income defined in the cife in the c | on of the at was a lines buse's syvoted to or ente | e inco<br>NOT<br>below<br>support<br>o each | ome of paid on w, the ct of |        |            |
|     | c.   |  |  |  |  |   |                             |        |            |
| , , | Total and enter on Line 13.  |  |  |  |  |   |                             | \$     | 0.00       |
| 14  | Subtract Line 13 from Line 12 and enter  |  | d.   | . C T.   | 141  | .1  |                             | \$     | 10,495.99  |
| 15  | Annualized current monthly income for 12 and enter the result.   | § 1325(b)(4). Multiply   | tne amoui  | nt from Li   | ne 14 b  | y tne i                                     |                             | \$     | 125,951.88 |
| 16  | <b>Applicable median family income.</b> Enter thousehold size. (This information is available the bankruptcy court.)   |  |  |  |  |   | k of                        |        |            |
|     | a. Enter debtor's state of residence: Virginia   | a  | _ b. Enter   | r debtor's   | househ   | old siz                                     | ze: <b>_4</b> _             | \$     | 91,661.00  |
| 17  | Application of § 1325(b)(4). Check the application of § 1325(b)(4). Check the application The amount on Line 15 is less than the 3 years" at the top of page 1 of this state.   ✓ The amount on Line 15 is not less than   | he amount on Line 16. tement and continue wi   | Check the this stat  | e box for '<br>tement.   | •  | _   |                             |        | •          |
|     | period is 5 years" at the top of page 1 c  |  |  |  |  | с аррі                                      | iicavie coi                 | 111111 | uncnt      |
|     | Part III. APPLICATION OF § 1   | 1325(b)(3) FOR DET   | ERMIN  | ING DIS  | POSA   | BLE   | INCOM                       | Œ      |            |

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| 18   | Enter  | r the amount from Line 11.   |  |  |  |  | \$    | 10,495.99  |
|--|--|--|--|--|--|--|-------|------------|
| 19   |  |  |  |  |  |  |       |            |
|  | a.   | Paycheck deductions  |  |  |  | \$ 764.82  | 4     |            |
|  | b.   | Child Support  |  |  |  | \$ 400.00  | 4     |            |
|  | c.   | See Continuation Sheet   |  |  |  | \$ 522.31  | J     | 4 00= 40   |
|  |  | al and enter on Line 19.   |  |  |  |  | \$    | 1,687.13   |
| 20   |  | ent monthly income for § 132   |  |  |  |  | \$    | 8,808.86   |
| 21   |  | nalized current monthly income denter the result.  | ne for § 1325(b)(3   | 3). Multi  | iply the amount from Line  | 20 by the numbe  | \$    | 105,706.32 |
| 22   | Appl   | icable median family income.   | Enter the amount   | from Lir   | ne 16.   |  | \$    | 91,661.00  |
| Application of § 1325(b)(3). Check the applicable box and proceed as directed.  The amount on Line 21 is more than the amount on Line 22. Check the box for "Disposable income is under § 1325(b)(3)" at the top of page 1 of this statement and complete the remaining parts of this statement. The amount on Line 21 is not more than the amount on Line 22. Check the box for "Disposable income determined under § 1325(b)(3)" at the top of page 1 of this statement and complete Part VII of this statement complete Parts IV, V, or VI. |  |  |  |  |  |  |       |            |
| 23   | _ d  | etermined under § 1325(b)(3)"  |  |  |  |  |       |            |
| 23   | _ d  | etermined under § 1325(b)(3)" omplete Parts IV, V, or VI.  | at the top of page   | 1 of this  |  | Part VII of this sta   |       |            |
| 23   | _ d  | etermined under § 1325(b)(3)" omplete Parts IV, V, or VI.  Part IV. CALCULA  | at the top of page   | 1 of this  | s statement and complete l   | Part VII of this start  ER § 707(b)(2)   |       |            |
| 23<br>24A  | Nation misce Experience from current   | etermined under § 1325(b)(3)" omplete Parts IV, V, or VI.  Part IV. CALCULA  | TION OF DEDU<br>tions under Stand<br>and services, hou<br>e "Total" amount to<br>of persons. (This in  | 1 of this  UCTIO  dards of  usekeepi from IRS informati e number   | ONS ALLOWED UND  The Internal Revenue So  ing supplies, personal ca S National Standards for a ion is available at www.us r of persons is the number   | ER § 707(b)(2)  Ervice (IRS)  re, and  Allowable Living sdoj.gov/ust/ or that would  |       |            |
|  | Nation misce Experience of any perso perso amou  | Part IV. CALCULA Subpart A: Deduct Parts IV. CALCULA Subpart A: De | at the top of page  FION OF DEDU  Lions under Stand  and services, hou  e "Total" amount if of persons. (This in  rt.) The applicable on your federal ince  Enter in Line al belons under 65 years of age is 61 years of age is 62 years of age is 63 years of age is 63 years of age is 64 years of age is 65 years of age is 61 years of age is 62 years of age is 63 years of age is 63 years of age is 64 years of age is 65 years of age i | dards of usekeepi from IRS informatic number come tax elow the action of age, action of action of age, action of action o | The Internal Revenue Soing supplies, personal cases National Standards for Action is available at www.ustrof persons is the number of amount from IRS National and in Line a2 the IRS Natr. (This information is available number of persons is the number of the applicable number of persons is the number of persons in Line b1 the applicable number of persons is the number of persons are category is the number of the age category is the number of persons at the persons at the second case of the persons are the second case of the persons are statement as the second case of the persons are statement as the second case of the persons are statement and case of the persons are sta | Part VII of this state Part VII of the Part VII of | \$ or | Do not     |
| 24A  | Nation misce Experience from currendeper Nation Out-to Out-to years categor of any person person amout Person and I. | Part IV. CALCULATE  Subpart A: Deduct  Subpart A: Deduct  Part IV. CALCULATE  Subpart A: Deduct  Subpart A: Deduct  Subpart A: Deduct  Part IV. CALCULATE  Subpart A: Deduct  Subpart A: Deduct  Subpart A: Deduct  Part IV. CALCULATE  Subpart A: Deduct  S | at the top of page  FION OF DEDU  Lions under Stand  and services, hou  e "Total" amount if of persons. (This in  rt.) The applicable on your federal ince  Cuter in Line a1 belons under 65 years of age is of the bankruptcy  ge, and enter in Lire e number of person wed as exemptions you support.) Multi t in Line c1. Multi esult in Line c2. A  24B.  60.00  | lards of usekeepi from IRS informatic number come tax elow the action of age, action of act | The Internal Revenue Some supplies, personal care supplies available at www.ustrof persons is the number of a return, plus the number of amount from IRS National and in Line a2 the IRS National and in Line a2 the IRS National care in Line b1 the applies applicable number of persons is the number of persons in the number of persons in the supplies and by Line b1 to obtain a second and c2 to obtain a total second supplies and c2 to obtain a total second seco | Part VII of this state Part VII of the Part VII of this state Part VII  | \$ or | Do not     |

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| <b>D22</b> C ( | Oma  | al Form 22C) (Chapter 13) (04/13)  |   |    |        |  |
|----------------|--|--|---|----|--------|--|
| 25A            | Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court). The applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. |  |   |    |        |  |
| 25B            | the II<br>infor<br>famil<br>tax re<br>the A  | Al Standards: housing and utilities; mortgage/rent expense. Enter, in RS Housing and Utilities Standards; mortgage/rent expense for your community is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the band by size consists of the number that would currently be allowed as exemple turn, plus the number of any additional dependents whom you support average Monthly Payments for any debts secured by your home, as standards and enter the result in Line 25B. Do not enter an amount less than the property of the pr | county and family size (this kruptcy court) (The applicable aptions on your federal income et.); enter on Line b the total of ted in Line 47; subtract Line b |    |        |  |
|                | a.   | IRS Housing and Utilities Standards; mortgage/rental expense   | \$ 1,386.00   |    |        |  |
|                | b.   | Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47   | \$ 1,567.00   |    |        |  |
|                | c.   | Net mortgage/rental expense  | Subtract Line b from Line a   | \$ |        |  |
| 26             |  | ties Standards, enter any additional amount to which you contend you our contention in the space below:  | are entitied, and state the basis   | \$ |        |  |
|                | an ex  | al Standards: transportation; vehicle operation/public transportation; pense allowance in this category regardless of whether you pay the exergardless of whether you use public transportation.   |   |    |        |  |
|                |  | k the number of vehicles for which you pay the operating expenses or<br>nses are included as a contribution to your household expenses in Line   |   |    |        |  |
| 27A            |  | $\square$ 1 $\checkmark$ 2 or more.  |   |    |        |  |
|                | Tran<br>Loca<br>Statis   | u checked 0, enter on Line 27A the "Public Transportation" amount fr<br>sportation. If you checked 1 or 2 or more, enter on Line 27A the "Ope<br>1 Standards: Transportation for the applicable number of vehicles in the<br>stical Area or Census Region. (These amounts are available at <a href="www.use">www.use</a><br>bankruptcy court.)   | rating Costs" amount from IRS ne applicable Metropolitan  | \$ | 488.00 |  |
| 27B            | experaddit<br>Tran   | Il Standards: transportation; additional public transportation expunses for a vehicle and also use public transportation, and you contend ional deduction for your public transportation expenses, enter on Line sportation" amount from IRS Local Standards: Transportation. (This a usedoj.gov/ust/ or from the clerk of the bankruptcy court.)  | that you are entitled to an 27B the "Public"  | \$ |        |  |

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## **B22C** (Official Form 22C) (Chapter 13) (04/13)

| D22C ( | Officia  | al Form 22C) (Chapter 13) (04/13)   |  |    |        |  |  |
|--------|--|---|--|----|--------|--|--|
|        | whic   | Il Standards: transportation ownership/lease expense; Vehicle 1. (h you claim an ownership/lease expense. (You may not claim an ownertwo vehicles.)   |  |    |        |  |  |
|        | ☐ 1 <b>✓</b> 2 or more.  |   |  |    |        |  |  |
| 28     | Enter<br>Trans   | r, in Line a below, the "Ownership Costs" for "One Car" from the IRS sportation (available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the batal of the Average Monthly Payments for any debts secured by Vehic act Line b from Line a and enter the result in Line 28. <b>Do not enter a</b>   | ankruptcy court); enter in Line be le 1, as stated in Line 47;                       |    |        |  |  |
|        | a.   | IRS Transportation Standards, Ownership Costs   | \$ 517.00  |    |        |  |  |
|        | b.   | Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 47  | \$ 299.08  |    |        |  |  |
|        | c.   | Net ownership/lease expense for Vehicle 1   | Subtract Line b from Line a  | \$ | 217.92 |  |  |
| 29     | Enter<br>Trans   | Il Standards: transportation ownership/lease expense; Vehicle 2. Good ked the "2 or more" Box in Line 28.  Try, in Line a below, the "Ownership Costs" for "One Car" from the IRS sportation (available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bastal of the Average Monthly Payments for any debts secured by Vehic act Line b from Line a and enter the result in Line 29. <b>Do not enter a</b> | Local Standards:<br>ankruptcy court); enter in Line b<br>le 2, as stated in Line 47; | Ψ  | 211192 |  |  |
|        | a.   | IRS Transportation Standards, Ownership Costs   | \$ 517.00  |    |        |  |  |
|        | b.   | Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47  | \$ 278.42  |    |        |  |  |
|        | c.   | Net ownership/lease expense for Vehicle 2   | Subtract Line b from Line a  | \$ | 238.58 |  |  |
| 30     | Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state, and local taxes, other than real estate and sales taxes, such as income taxes, self-employment taxes, social-security taxes, and Medicare taxes. Do not include real estate or sales taxes. |   |  |    | 506.51 |  |  |
| 31     | dedu   | er Necessary Expenses: involuntary deductions for employment. Ections that are required for your employment, such as mandatory retirement costs. Do not include discretionary amounts, such as voluntary amounts.   | ement contributions, union dues,   | \$ |        |  |  |
| 32     | for te   | er Necessary Expenses: life insurance. Enter total average monthly perm life insurance for yourself. Do not include premiums for insural le life or for any other form of insurance.  |  | \$ | 24.05  |  |  |
| 33     | requi  | er Necessary Expenses: court-ordered payments. Enter the total modered to pay pursuant to the order of a court or administrative agency, shents. Do not include payments on past due obligations included in  | uch as spousal or child support  | \$ |        |  |  |
| 34     | Other Necessary Expenses: education for employment or for a physically or mentally challenged  |   |  |    |        |  |  |
| 35     | Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend   |   |  |    |        |  |  |
| 36     | exper<br>reiml   | er Necessary Expenses: health care. Enter the total average monthly nd on health care that is required for the health and welfare of yoursel bursed by insurance or paid by a health savings account, and that is in 24B. Do not include payments for health insurance or health savings  | f or your dependents, that is not excess of the amount entered in                    | \$ |        |  |  |
| 37     | you a<br>servi-<br>neces   | er Necessary Expenses: telecommunication services. Enter the total actually pay for telecommunication services other than your basic hom ce—such as pagers, call waiting, caller id, special long distance, or in ssary for your health and welfare or that of your dependents. <b>Do not in acted.</b>   | ne telephone and cell phone ternet service—to the extent                             | \$ |        |  |  |

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|    | Official Form 22C) (Chapter 13) (04/13)  |                |
|----|--|----------------|
| 38 | <b>Total Expenses Allowed under IRS Standards.</b> Enter the total of Lines 24 through 37.   | \$<br>3,721.06 |
|    | Subpart B: Additional Expense Deductions under § 707(b)<br>Note: Do not include any expenses that you have listed in Lines 24-37   |                |
|    | <b>Health Insurance, Disability Insurance, and Health Savings Account Expenses.</b> List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents.  |                |
|    | a. Health Insurance \$ 416.00  |                |
|    | b. Disability Insurance \$   |                |
| 39 | c. Health Savings Account \$   |                |
|    | Total and enter on Line 39   | \$<br>416.00   |
|    | If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below:  \$  |                |
| 40 | Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34.   | \$             |
| 41 | <b>Protection against family violence.</b> Enter the total average reasonably necessary monthly expenses that you actually incur to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.   | \$             |
| 42 | Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.  | \$             |
| 43 | Education expenses for dependent children under 18. Enter the total average monthly expenses that you actually incur, not to exceed \$156.25 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.                  | \$             |
| 44 | Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary. | \$             |
|    | Charitable contributions. Enter the amount reasonably necessary for you to expend each month on charitable contributions in the form of cash or financial instruments to a charitable organization as defined  |                |
| 45 | in 26 U.S.C. § 170(c)(1)-(2). Do not include any amount in excess of 15% of your gross monthly income.   | \$<br>         |

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|    |  |   | Subpart C  | : Deductions for Deb  | ot Pay   | ment   |  |                                       |    |               |
|----|--|---|--|---|--|--|--|---------------------------------------|----|---------------|
|    | you o<br>Payn<br>the to<br>follo   | own, list the name of the creditor<br>nent, and check whether the payer<br>total of all amounts scheduled as<br>wing the filing of the bankruptcy.<br>Enter the total of the Average I  | r, identify to<br>ment include<br>contractua<br>y case, divi   | the property securing to<br>des taxes or insurance.<br>Ily due to each Secure<br>ded by 60. If necessar   | he deb<br>The A<br>d Crec  | ot, state the A<br>Average Mor<br>litor in the 60        | verage<br>thly Pay<br>month            | Monthly yment is s                    |    |               |
| 47 |  | Name of Creditor  | Property   | Securing the Debt   |  | Average<br>Monthly<br>Payment                            | includ                                 | s payment<br>le taxes or<br>nsurance? |    |               |
|    | a.   | Bb And T  | Resider  | ice   | \$   | 1,567.00   | ☐ ye                                   | s 🗹 no                                |    |               |
|    | b.   | Chase Auto  | Automo   | bile (1)  | \$   | 299.08   | ☐ ye                                   | s 🗹 no                                |    |               |
|    | c.   | See Continuation Sheet  |  |   | \$   | 328.42   | ☐ ye                                   | s 🔲 no                                |    |               |
|    |  |   |  | Total: Add  | llines   | a, b and c.  |  |                                       | \$ | 2,194.50      |
|    | residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 47, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page. |   |  |   |  |  |  |                                       |    |               |
| 48 |  | Name of Creditor  |  | Property Securing th  | ie Deb   | t  |  | 00th of the<br>e Amount               |    |               |
|    | a.   | Bb And T  |  |   |  |  | \$                                     | 86.67                                 |    |               |
|    | b.   |   |  |   |  |  | \$                                     |                                       |    |               |
|    | c.   |   |  |   |  |  | \$                                     |                                       |    |               |
|    |  |   |  |   |  | Total: Ad  | d Linea                                | a, b and c.                           | \$ | 86.67         |
|    |  |   |  |   |  | Total. Au  | d filles a                             | a, o una c.                           | Ψ  |               |
| 49 | such<br>bank   | ments on prepetition priority c<br>as priority tax, child support and<br>ruptcy filing. Do not include cu   | d alimony o  | claims, for which you gations, such as thos   | were 1   | by 60, of all iable at the tiut in Line 3.               | priority<br>me of y                    | claims,<br>our                        | \$ |               |
| 49 | such<br>bank<br>Cha  | as priority tax, child support and  | d alimony o  | claims, for which you gations, such as thos   | were 1   | by 60, of all iable at the tiut in Line 3.               | priority<br>me of y                    | claims,<br>our                        | ·  |               |
| 49 | such<br>bank<br>Cha  | as priority tax, child support and ruptcy filing. Do not include cupter 13 administrative expense   | d alimony ourrent oblices. Multiply  | gations, for which you gations, such as thosy the amount in Line a  | were 1   | by 60, of all iable at the tiut in Line 3.               | priority<br>me of y                    | claims,<br>our                        | ·  |               |
| 49 | such bank  Chaithe re  | as priority tax, child support and ruptcy filing. <b>Do not include cupter 13 administrative expense</b> esulting administrative expense.   | d alimony of the street oblines. Multiply apter 13 plus trict as det tive Office available a   | claims, for which you gations, such as thosy the amount in Line a an payment.  ermined under for United States t the bankruptcy                 | were leeset of by the  | by 60, of all iable at the tiut in Line 3.               | priority<br>me of y<br>3.<br>Line b, a | claims,<br>our                        | ·  | 0.04          |
|    | such bank  Chapthe real  | as priority tax, child support and ruptcy filing. Do not include curpter 13 administrative expense esulting administrative expense.  Projected average monthly Ch Current multiplier for your disschedules issued by the Execu Trustees. (This information is <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the   | d alimony of the street oblices. Multiply apter 13 plus trict as det tive Office available and clerk of  | claims, for which you gations, such as those the amount in Line a an payment.  ermined under for United States the bankruptcy                   | were lie set of by the   | by 60, of all iable at the tiut in Line 3.               | priority me of y 3ine b, a 791.36      | claims,<br>our                        | ·  |               |
|    | such bank  Chapthe road.  b.   | as priority tax, child support and ruptcy filing. Do not include curpter 13 administrative expense esulting administrative expense.  Projected average monthly Ch Current multiplier for your disschedules issued by the Execu Trustees. (This information is <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the court.)                                     | d alimony of the street oblices. Multiply apter 13 plus trict as det tive Office available and clerk of  | claims, for which you gations, such as those the amount in Line a an payment.  ermined under for United States the bankruptcy  of Chapter 13    | were lie set of by the   | by 60, of all iable at the tiut in Line 3.               | priority me of y 3ine b, a 791.36      | claims,<br>our                        | ·  | 0.04          |
|    | such bank  Chap the real a. b.   | as priority tax, child support and ruptcy filing. Do not include curpter 13 administrative expense esulting administrative expense.  Projected average monthly Ch Current multiplier for your disschedules issued by the Execu Trustees. (This information is <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the court.)  Average monthly administrative     | d alimony of the street oblives. Multiply apter 13 ple trict as det tive Office available and clerk of the expense   | claims, for which you gations, such as thosy the amount in Line a an payment.  ermined under for United States to the bankruptcy  of Chapter 13 | were leeset of by the \$\$  X  Total: and b  | by 60, of all iable at the tiut in Line 3.               | priority me of y 3ine b, a 791.36      | claims,<br>our                        | \$ |               |
| 50 | such bank  Chap the real a. b.   | as priority tax, child support and ruptcy filing. Do not include curpter 13 administrative expense esulting administrative expense.  Projected average monthly Ch Current multiplier for your disschedules issued by the Execu Trustees. (This information is <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the court.)  Average monthly administrative ase | d alimony of the street oblives. Multiply apter 13 plus trict as det tive Office available and clerk of the expense of the total trick of the expense of the total trick of the expense of the total trick of the expense of the expens | claims, for which you gations, such as thosy the amount in Line a an payment.  ermined under for United States to the bankruptcy  of Chapter 13 | were leeset of by the system of the system o | by 60, of all iable at the tiut in Line 3. e amount in I | priority me of y 3ine b, a 791.36      | claims,<br>our                        | \$ | 0.04<br>47.48 |

|    | Omc  | n Form 22C) (Chapter 13) (04/13)  |                            |  |         |          |
|----|--|---|----------------------------|--|---------|----------|
|    |  | Part V. DETERMINATION OF DISPOSABLE INCOME UNDER  | R § 1                      | 325(b)(2)                                  |         |          |
| 53 | Tota   | current monthly income. Enter the amount from Line 20.  |                            |  | \$      | 8,808.86 |
| 54 | <b>Support income.</b> Enter the monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I, that you received in accordance with applicable nonbankruptcy law, to the extent reasonably necessary to be expended for such child. |   |                            |  |         |          |
| 55 | Qualified retirement deductions. Enter the monthly total of (a) all amounts withheld by your employer from wages as contributions for qualified retirement plans, as specified in § 541(b)(7) and (b) all required repayments of loans from retirement plans, as specified in § 362(b)(19).                  |   |                            |  |         |          |
| 56 |  |   |                            |  |         |          |
| 57 | for v<br>in lin<br>total<br>prov   | action for special circumstances. If there are special circumstances that justify addit hich there is no reasonable alternative, describe the special circumstances and the reses a-c below. If necessary, list additional entries on a separate page. Total the expensin Line 57. You must provide your case trustee with documentation of these expenses de a detailed explanation of the special circumstances that make such expenses necessable. | sultir<br>ses and<br>s and | ng expenses<br>and enter the<br>I you must |         |          |
| 37 |  | Nature of special circumstances   |                            | expense                                    |         |          |
|    | a.   | Lanning Adjustment No Tax Refund  | \$                         | 1,092.02                                   |         |          |
|    | b.   |   | \$                         |  |         |          |
|    | c.   |   | \$                         |  |         |          |
|    |  | Total: Add l  | Line                       | s a, b, and c                              | \$      | 1,092.02 |
| 58 |  | l adjustments to determine disposable income. Add the amounts on Lines 54, 55, 5 the result.  | 56, a                      | nd 57 and                                  | \$      | 8,064.98 |
| 59 | Mor  | thly Disposable Income Under § 1325(b)(2). Subtract Line 58 from Line 53 and en   | ter tl                     | ne result.                                 | \$      | 743.88   |
|    |  | Part VI. ADDITIONAL EXPENSE CLAIMS  |                            |  |         |          |
|    | and v  | <b>Expenses.</b> List and describe any monthly expenses, not otherwise stated in this form elfare of you and your family and that you contend should be an additional deduction the under $\S 707(b)(2)(A)(ii)(I)$ . If necessary, list additional sources on a separate page monthly expense for each item. Total the expenses.  | froi                       | m your curren                              | t montl | nly      |
|    |  | Expense Description   |                            | Monthly A                                  | mount   | ]        |
| 60 | a.   |   |                            | \$   |         | ]        |
|    | b.   |   |                            | \$   |         |          |
|    | c.   |   |                            | \$   |         |          |
|    |  | Total: Add Lines a, b and   | С                          | \$   |         |          |
|    |  | Part VII. VERIFICATION  |                            |  |         |          |
|    |  | are under penalty of perjury that the information provided in this statement is true and lebtors must sign.)  | d cor                      | rect. (If this a                           | joint c | ease,    |
| 61 | Date:  | December 9, 2013 Signature: /s/ Dale W. Anderson, Jr.   |                            |  |         |          |
|    |  | (Debtor)  |                            |  |         |          |
|    | Date:  | Signature:  |                            |  |         |          |
|    |  | (Joint Debtor, if any   | y)                         |  |         |          |

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Case No. 13-61952

Document

Debtor(s)

AMENDED CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME

**Continuation Sheet - Marital adjustment** 

Description Amount Wife's Bills 50.00 Wife's Sons 472.31

IN RE Anderson, Dale Wesley Jr.

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IN RE Anderson, Dale Wesley Jr. \_\_\_\_\_ Case No. **13-61952** Debtor(s)

AMENDED CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME

**Continuation Sheet - Future payments on secured claims** 

| Westlake Financial Svc | Automobile (2)             | 278.42<br>50.00         | No<br>No         |
|------------------------|----------------------------|-------------------------|------------------|
| Name of Creditor       | Property Securing the Debt | 60-month<br>Average Pmt | include taxes or |
|                        |                            |                         | Does payment     |